## FORM D

**UNITED STATES** SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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OMB APPROVAL	
OMB Number:	
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# FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR LIMITED OFFEDING EXEMPTION

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Expires:
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hours per response
SEC USE ONLY

DATE RECEIVED

Serial

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	MIFORM LIN	TITED OF		G EXENIF	SEC MA	AL A		
Name of Offering (☐ check if this is an ar	nendment and name l	has changed, and	indicate c	hange,)		PECENEO (S)		
Liquid Realty Partners IV, L.P Priva	te Offering of Partn	ership Interests			FED			
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule	505 ☑ Rule 506	Secti □ Secti	on 4(6) 🗆 UL(		15 2007 (5)		
Type of Filing: ☑ New Filing ☐ Amenda	ment				121	(00)/ \\		
	<b>A. B</b> A	ASIC IDENTIF	ICATION	DATA	\@\ 78.			
1. Enter the information requested about the	ne issuer					SECTION		
Name of Issuer (☐ check if this is an ame	ndment and name ha	s changed, and ir	ndicate cha	inge.)	レ			
Liquid Realty Partners IV, L.P.								
Address of Executive Offices	C	Number and Stre	et, City, S	tate. Zip Code)	Telephone Numbe	er (Including Area Code)		
44 Montgomery Street, Suite 3701, San	Francisco, CA 9410	4			(415) 296-9500			
Address of Principal Business Operations		Number and Stre	et, City, S	tate, Zip Code)	Telephone Numbe	er (Including Area Code)		
(if different from Executive Offices)								
Brief Description of Business					£	PROCESSED		
Investments in real estate and real estat	e-related assets				្រ	ROCLUULD		
Type of Business Organization								
□ corporation	☑ Iimited partnersh	ip, already form	ed	□ other (	please specify):	FEB 2 7 2007		
☐ business trust	☐ limited partnersh	ip, to be formed			<u></u>	2		
		Month	Year		-	THOMSON		
		0 9	0 6	☑ Actual □	Estimated	FINANCIAL		
Actual or Estimated Date of Incorporation or Organization:								
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:								
		CN for Can	ada; FN fo	or other foreign	jurisdiction)	D E		

### GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230,501 et seq. or 15 U.S.C. 77d(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		A. BASIC IDE	NTIFICATION DATA							
. Enter the information requested for the following:										
Each promoter of the is	Each promoter of the issuer, if the issuer has been organized within the past five years;									
<ul> <li>Each beneficial owner issuer;</li> </ul>	• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;									
<ul> <li>Each executive officer</li> </ul>	and director of	corporate issuers and of o	corporate general and ma	naging partners o	of partnership issuers; and					
<ul> <li>Each general and mana</li> </ul>	iging partner of	partnership issuers.								
Check Box(es) that Apply:	☑ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner					
Full Name (Last name first, if ind	lividual)									
Liquid Realty Advisors IV, LLC	C									
Business or Residence Address	(Number and Str	reet, City, State, Zip Cod	e)							
44 Montgomery Street, Suite 37	01, San Franci	sco, CA 94104								
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner					
Full Name (Last name first, if ind	lividual).									
Liquid Realty G.P. IV, LLC										
Business or Residence Address	(Number and Str	reet, City, State, Zip Cod	e)							
44 Montgomery Street, Suite 37	01, San Franci	sco, CA 94104								
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner					
Full Name (Last name first, if ind	lividual)									
Landress, Scott M.										
Business or Residence Address	(Number and Str	reet, City, State, Zip Cod	e)							
44 Montgomery Street, Suite 37	01, San Franci	sco, CA 94104								
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner					
Full Name (Last name first, if ind	lividual)									
Giller, Jeffrey M.										
Business or Residence Address	(Number and Str	reet, City, State, Zip Cod	e)							
44 Montgomery Street, Suite 37	/01, San Franci	sco, CA 94104								
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner					
Full Name (Last name first, if ind	lividual)			·						
Business or Residence Address	Business or Residence Address (Number and Street, City, State, Zip Code)									
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner					
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner					
Full Name (Last name first, if ind	lividual)			<del></del>						

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Business or Residence Address (Number and Street, City, State, Zip Code)

B. INFORMATION ABOUT OFFERING														
										Yes	No			
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										🗆	Ø			
Answer also in Appendix, Column 2, if filing under ULOE														
2.	2. What is the minimum investment that will be accepted from any individual?(General Partners reserves the right to accept commitments of lesser amounts)										\$ 10,000,000 			
										Yes	No			
3. Does the offering permit joint ownership of a single unit?											☑			
4.	similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Full Nam	e (Last n	ame first, i	if individua	al)										
N/A														
Business	or Reside	ence Addre	ess (Numb	er and Stree	et, City, St	ate, Zip Co	ode)							
Name of	Associate	ed Broker	or Dealer											
States in	Which Po	erson Liste	d Has Soli	cited or Int	ends to So	licit Purch	asers							
(Ch	eck "All	States" or	check indi	vidual State	es)						*****************		Il States	
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
	[RI]	[SC]	[SD]	[TN]	[TX]	(UT)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Nam	e (Last n	ame first, i	if individua	al)						•				
Business	or Reside	ence Addre	ess (Numb	er and Stree	et, City, St	ate, Zip Co	ode)							
Name of	Associate	ed Broker	or Dealer										<u>.</u>	
States in	Which Pe	erson Liste	d Has Soli	cited or Int	ends to So	licit Purch	asers							
									************			A	ll States	
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Nam	e (Last n	ame first,	if individua	al)										
Business	or Reside	ence Addre	ess (Numb	er and Stre	et, City, St	ate, Zip Co	xde)							
Name of	Associate	ed Broker	or Dealer											
States in	Which Pe	erson Liste	d Has Soli	cited or Int	ends to So	licit Purch	asers							
				vidual State					***************************************			🗆 A	ll States	
,	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
	(RI)	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
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(Use blank sheet, or copy and use additional copies of this sheet, if necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PE	ROCEEDS		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold.  Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box 0 and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price	Α	mount Already Sold
	Debt	-	\$	-0-
	Equity		s	
	□ Common □ Preferred	<del></del>		
	Convertible Securities (including warrants)	s -0-	s	-0-
	Partnership Interests			158,500,000
	Other (Specify)		<u>s</u>	-0-
	Total			158,500,000
	Answer also in Appendix, Column 3, if filing under ULOE.	<u> </u>	<u> </u>	11/01/1001000
2.	Enter the number of accredited and non-accredited investors, who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		Number Investors	1	Aggregate  Dollar Amount  of Purchases
	Accredited Investors	12	<u>s</u> _	158,500,000
	Non-accredited Investors		<u>s</u>	-0
	Total (for filings under Rule 504 only)	N/A	<u>\$</u>	N/A
	Answer also in Appendix. Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.			
	Type of offering	Type of Security	1	Dollar Amount Sold
	Rule 505		\$	
	Regulation A		<u>s</u>	
	Rules 504		<u>s</u>	
	Total		<u>s</u> _	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees	<u>v</u>	] <u>\$</u>	-0
	Printing and Engraving Costs	☑	1 <u>s</u>	20,000
	Legal Fees	☑	<u>s</u>	360,000
	Accounting Fees			-0-
	Engineering Fees			-0-
	Sales Commissions (specify finders' fees separately)			
	Other Expenses (identify) Travel-\$50,000; miscellaneous-\$10,000			60,000
				,

total exp	<ul> <li>b. Enter the difference between the aggregences furnished in response to Part C - Questions</li> </ul>	tion 4.a. This di	fference is the "adjusted gr	oss proceeds to	the			<u>s</u>	_ 59	99,560,000
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount of any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.									
							ayments to Officers, Directors, & Affiliates		P	Payments to Others
	Salaries and fees	•••••		•••••	Ø	<u>s</u>	-0-	☑	<u>\$</u>	-0-
	Purchase of real estate	***************************************		•••••	🗹	<u>s</u>	-0-	☑	<u>s</u>	-0-
	Purchase, rental or leasing and installation	of machinery ar	nd equipment	•••••	☑	<u>s</u>	-0-	☑	<u>s</u>	-0-
	Construction or leasing of plant buildings	and facilities		•••••	☑	<u>\$</u>	-0-	✓	<u>\$</u>	-0-
	Acquisition of other businesses (including used in exchange for the assets or securitie	Ø	<u>\$</u>	-0-	Ø	<u>s</u>	-0-			
	Repayment of indebtedness	Ø	<u>s</u>	-0-	☑	<u>\$</u>	-0-			
	Working capital	🗹	<u>s</u>	-0-	✓	<u>s</u> _	599,560,000			
	Other (specify):	☑	<u>s</u>	-0-	☑	<u>\$</u>	-0-			
	Column Totals	☑	<u>s</u>	-0-	☑	<u>\$</u>	599,560,000			
	Total Payments Listed (column totals adde	ed)		••••••••••••	***		☑ <u>\$ 599.</u>	<u>,560,</u>	<u>000</u>	
		D. F	EDERAL SIGNATURE							
constitut	er has duly caused this notice to be signed by es an undertaking by the issuer to furnish to d by the issuer to any non-accredited investo	the U.S. Securit	ies and Exchange Commiss	f this notice is ion, upon writt	iled u	nder l uest o	Rule 505, the	foll e inf	owin orma	ig signature
	rint of Type) Realty Partners IV, L.P.	Signature	J. spir	Date Feb	ruary	12, 2	007			
Name of	Signer (Print or Type)	1	(Print or Type)							
Scott La	andress of the	Authorized Si	gnatory of Liquid Realty	Partners G.P.	IV, L.	P. the	e general pa	rtne	r of	the Issuer

# **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)